County: Waukesha WATERS OF WESTMORELAND, THE 1810 KENSINGTON DRIVE WAUKESHA 53188 Phone: (262) 548-1400
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/00): 245
Total Licensed Bed Capacity (12/31/00): 245
Number of Residents on 12/31/00: 184 Ownership: Highest Level License: Operate in Conjunction with CBRF? Title 18 (Medicare) Certified? Average Daily Census: Corporati on Skilled No Yes 215

| ************ | **** | k************************* | ***** | ************ | ****** | ****************** | ****** |
|---|----------|-----------------------------|---------------------------|--------------|--------|---------------------------------|----------------|
| Services Provided to Non-Residents | | Age, Sex, and Primary Diagn | Length of Stay (12/31/00) | % | | | |
| Home Health Care Supp. Home Care-Personal Care | No No | Primary Diagnosis | % | Age Groups | % | Less Than 1 Year 1 - 4 Years | 32. 6 47. 8 |
| Supp. Home Care-Household Services | No | Developmental Disabilities | 1. 1 | Under 65 | 4. 3 | More Than 4 Years | 19. 6 |
| Day Servi ces | No | Mental Illness (Org./Psy) | 16. 3 | 65 - 74 | 10. 9 | | |
| Respite Care | No | Mental Illness (Other) | 2. 7 | 75 - 84 | 33. 7 | | 100. 0 |
| Adult Day Care | No | Alcohol & Other Drug Abuse | 1.6 | 85 - 94 | 42. 4 | ************* | ****** |
| Adult Day Health Care | No | Para-, Quadra-, Hemiplegic | 6. 5 | 95 & 0ver | 8. 7 | Full-Time Equivalen | t |
| Congregate Meals | No | Cancer | 3.8 | | | Nursing Staff per 100 Re | si dents |
| Home Delivered Meals | No | Fractures | 16. 3 | | 100. 0 | (12/31/00) | |
| Other Meals | No | Cardi ovascul ar | 21. 7 | 65 & 0ver | 95. 7 | [| |
| Transportation | No | Cerebrovascul ar | 8. 7 | | | RNs | 7. 5 |
| Referral Service | No | Di abetes | 7. 1 | Sex | % | LPNs | 5. 7 |
| Other Services | No | Respi ratory | 8. 7 | | | Nursing Assistants | |
| Provide Day Programming for | | Other Medical Conditions | 5.4 | Male | 22. 8 | Aides & Orderlies | 41.7 |
| Mentally Ill | Yes | | | Female | 77. 2 | | |
| Provide Day Programming for | | | 100. 0 | | | | |
| Developmentally Disabled | Yes | | | | 100. 0 | | |
| ************ | **** | ************************* | ***** | ******* | ****** | *********** | ***** |

Method of Reimbursement

| | Medicare (Title 18) | | | (| Medicaid (Title 19) | | | Other Private | | | ri vate | Pay | | Manage | ed Care | | Percent |
|--------------------|------------------------|-------|-----------|------|------------------------|-----------|----|---------------|-----------|----|----------|----------|-----|----------------|---------|-----|------------|
| | | | Per Die | em e | Per Diem | | | n Per Diem | | | Per Diem | | | Per Diem Total | | | Of All |
| Level of Care | No. | % | Rate | No. | % | Rate | No |). % | Rate | No | . % | Rate | No. | % | Rate | No. | Resi dents |
| Int. Skilled Care | 0 | 0. 0 | \$0, 00 | 0 | 0. 0 | \$0.00 | 0 | 0. 0 | \$0.00 | 0 | 0. 0 | \$0.00 | 0 | 0. 0 | \$0.00 | 0 | 0. 0% |
| Skilled Care | 13 | | \$252. 93 | - | 100. 0 | \$108. 25 | 8 | 100. 0 | \$108. 25 | 38 | | \$164.00 | - | | | 184 | 100. 0% |
| Intermediate | | | | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Limited Care | | | | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Personal Care | | | | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Residential Care | | | | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Dev. Di sabl ed | | | | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Traumatic Brain In | i. 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Ventilator-Depende | nt 0 | 0. 0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0 | \$0.00 | 0 | 0.0% |
| Total | 13 | 100.0 | | 123 | 100. 0 | | 8 | 100.0 | | 38 | 100.0 | | 2 | 100.0 | | 184 | 100.0% |

Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Admissions, Discharges, and Deaths During Reporting Period % Needi ng Total Assi stance of Activities of Percent Admissions from: % Totally Number of Private Home/No Home Health 14.7 Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents Private Home/With Home Health 0.0 Baťhi ng 0.0 **59.** 2 40.8 184 Other Nursing Homes 2.4 Dressing 4.3 87. 5 8. 2 184 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Transferring 15.8 8. 7 80.0 75. 5 184 67.9 0.0 Toilet Use 14. 7 17. 4 184 0.0 Eating 20. 1 72. 8 7. 1 184 ****** Other Locations 2.9 Total Number of Admissions Continence Special Treatments 245 Receiving Respiratory Care
Receiving Tracheostomy Care
Receiving Suctioning
Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 7. 6 4.3 Private Home/No Home Health 5.3 Occ/Freq. Incontinent of Bladder 61.4 0.0 Private Home/With Home Health 0.0 Occ/Freq. Incontinent of Bowel 43. 5 1. 1 Other Nursing Homes 4.0 1.6 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 45.4 Mobility 2.7 Physically Restrained 0.5 0.0 32.6 0.0 Other Locations 5.3 Skin Care Other Resident Characteristics 9. 2 Deaths 40. 1 With Pressure Sores Have Advance Directives 79.9 Total Number of Discharges With Rashes 7. 1 Medi cati ons 302 Receiving Psychoactive Drugs (Including Deaths) 47. 3

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

| | | Owne | ershi p: | Bed | Si ze: | | ensure: | | | | |
|--|--------------|--------------|-----------|--------------|--------|--------|---------|--------------|-------|--|--|
| | Thi s | Proj | ori etary | 20 | 00+ | Ski l | led | Al l | | | |
| | Facility | Peer Group | | Peer | Group | Peer | Group | Facilities | | | |
| | % | % | Ratio | % | Ratio | % | Ratio | % | Ratio | | |
| Occupancy Rate: Average Daily Census/Licensed Beds | 87. 8 | 74. 6 | 1. 18 | 80. 3 | 1. 09 | 81. 9 | 1. 07 | 84. 5 | 1.04 | | |
| Current Residents from In-County | 84. 8 | 84. 4 | 1.00 | 84. 7 | 1.00 | 85. 6 | 0. 99 | 77. 5 | 1.09 | | |
| Admissions from In-County, Still Residing | 21. 2 | 20. 4 | 1. 04 | 28. 9 | 0.74 | 23. 4 | 0. 91 | 21. 5 | 0. 99 | | |
| Admissions/Average Daily Census | 114. 0 | 164. 5 | 0. 69 | 96. 3 | 1. 18 | 138. 2 | 0. 82 | 124. 3 | 0. 92 | | |
| Discharges/Average Daily Census | 140. 5 | 165. 9 | 0. 85 | 100. 6 | 1.40 | 139. 8 | 1.00 | 126. 1 | 1. 11 | | |
| Discharges To Private Residence/Average Daily Census | 7. 4 | 62. 0 | 0. 12 | 26. 4 | 0. 28 | 48. 1 | 0. 15 | 49. 9 | 0. 15 | | |
| Residents Receiving Skilled Care | 100 | 89. 8 | 1. 11 | 88. 4 | 1. 13 | 89. 7 | 1. 11 | 83. 3 | 1. 20 | | |
| Residents Aged 65 and Older | 95. 7 | 87. 9 | 1.09 | 90. 4 | 1.06 | 92. 1 | 1.04 | 87. 7 | 1.09 | | |
| Title 19 (Medicaid) Funded Residents | 66. 8 | 71. 9 | 0. 93 | 73. 5 | 0. 91 | 65. 5 | 1. 02 | 69. 0 | 0. 97 | | |
| Private Pay Funded Residents | 20. 7 | 15. 0 | 1. 37 | 18. 7 | 1. 10 | 24. 5 | 0.84 | 22. 6 | 0. 91 | | |
| Developmentally Disabled Residents | 1. 1 | 1. 3 | 0.82 | 1. 2 | 0.89 | 0. 9 | 1. 22 | 7. 6 | 0. 14 | | |
| Mentally Ill Residents | 19. 0 | 31. 7 | 0. 60 | 33. 1 | 0. 58 | 31. 5 | 0. 60 | 33. 3 | 0. 57 | | |
| General Medical Service Residents | 5. 4 | 19. 7 | 0. 28 | 20. 6 | 0. 26 | 21. 6 | 0. 25 | 18. 4 | 0. 29 | | |
| Impaired ADL (Mean) | 52. 9 | 50. 9 | 1.04 | 52. 0 | 1. 02 | 50. 5 | 1.05 | 49. 4 | 1.07 | | |
| Psychological Problems | 47. 3 | 52. 0 | 0. 91 | 49. 4 | 0. 96 | 49. 2 | 0. 96 | 50. 1 | 0.94 | | |
| Nursing Care Required (Mean) | 7. 7 | 7. 5 | 1. 03 | 6. 8 | 1. 13 | 7. 0 | 1. 10 | 7. 2 | 1.08 | | |